CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

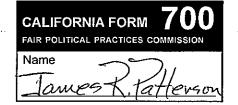




APR 0 1 2011

Please type or print ir	n ink.	2011 APR -1. Pi	.nasio _k	JULIE L. RODEWALD COUNTY CLERK		
NAME OF FILER	PAHERSO		JAMES	DEPOTY CLERK KEN FRO		
1. Office, Agency			JAME!	(47)		
Agency Name	1 0.	.)	. "	· · · · · · · · · · · · · · · · · · ·		
Division, Board, Der	HOF SAN partment, District, if applicable	LLUIS OF	Your Position			
	OF SUDER	VISORS		RVISÓR		
-	le positions, list below or on an		/			
Agency:			Position:			
2. Jurisdiction o	of Office (Check at least or	ue box)		<u>,</u>		
☐ State			☐ Judge (Statewide Jur	· · · · · · · · · · · · · · · · · · ·		
☐ Multi-County —			Decounty of SAN	N LUIS OBISPO		
City of			Other			
3. Type of Stater	ment (Check at least one b	ox)				
2010	period covered is January 1, 20	10, through December 31,	Leaving Office: Da (Check one)	te Left		
-	-or- covered is///	through December 31	•	red is January 1, 2010, through the date of		
2010.	bovered to	_, though becember 51,	leaving office.			
Assuming Office	ce: Date/	_	 The period cover of leaving office. 	red is, through the date		
Candidate: Ele	ection Year	Office sought, if diffe	rent than Part 1:			
4. Schedule Sum	nmary		N	2		
Check applicable s	schedules or "None."	► To	otal number of pages includ	ding this cover page:		
=	Investments - schedule attach	<u> </u>	- /	ans, & Business Positions - schedule attached		
	· <i>Investments</i> – schedule attach Real <i>Property</i> – schedule attach	_	Schedule D - Income — Gifts — schedule attached Schedule E - Income — Gifts — Travel Payments — schedule attached			
ochedale b - A	tear i roperty – scriedule attaci.	-or-	J Schedule E - Income – Gr	ins – Traver Payments – schedule attached		
	□ No	one - No reportable interes	ts on any schedule			
				_		
				-		
			<u></u>	2		
	onable diligence in preparing thi ttached schedules is true and c			Fied		
-	alty of perjury under the laws					
Δ.	7W/ 1/11					
Date Signed	(month, day, fear)	Sig	nat	_		

SCHEDULE D Income – Gifts



► NAME OF SOURCE	. , , –		16	► NAME OF SOURCE				
CA Min	1 State t	air	Ш					
ADDRESS (Busines			Ш	ADDRESS (Business Address Acceptable)				
Pass	bles, CA	93447	Ш					
BUSINESS ACTIVIT		· · · · · · · · · · · · · · · · · · ·	П	BUSINESS ACTIVITY, IF ANY, OF SOURCE				
	,, ,		Ш		.,			
		DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		
71_10	s 100°	Fair Passes (2)			\$			
	\$				\$			
·	\$				\$			
► NAME OF SOURCE	:			► NAME OF SOURCE				
ADDRESS (Business Address Acceptable)				ADDRESS (Business Address Acceptable)				
BUSINESS ACTIVIT	Y, IF ANY, OF SOUR	RCE		BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		
	\$				\$			
//	\$				\$			
	\$				\$			
NAME OF SOURCE			\prod	► NAME OF SOURCE				
ADDRESS (Business	s Address Acceptable	e)		ADDRESS (Business Address Acceptable)				
BUSINESS ACTIVITY, IF ANY, OF SOURCE				BUSINESS ACTIVITY, IF ANY, OF SOURCE				
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		
	\$				\$			
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	\$				\$			
Comments:								
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